

# BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number  
10/425105  
LUC-425-YANG-20-11

### CLAIMS AS FILED - PART I

|                                  | (Column 1)      | (Column 2)               |
|----------------------------------|-----------------|--------------------------|
| TOTAL CLAIMS                     | 12              |                          |
| FOR                              | NUMBER FILED    | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 12 minus 20 = * |                          |
| INDEPENDENT CLAIMS               | 2 minus 3 = *   |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |                 | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE | OR     | OTHER THAN SMALL ENTITY |
|-------------------|--------|-------------------------|
| RATE              | FEE    | RATE                    |
| BASIC FEE         | 375.00 | OR BASIC FEE 750.00     |
| X\$ 9=            |        | OR X\$18=               |
| X42=              |        | OR X84=                 |
| +140=             |        | OR +280=                |
| TOTAL             |        | OR TOTAL 750            |

### CLAIMS AS AMENDED - PART II

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * 10                             | Minus                              | ** =          |
| Independent   | * 0                              | Minus                              | *** =         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY     | OR             | OTHER THAN SMALL ENTITY |
|------------------|----------------|-------------------------|
| RATE             | ADDITIONAL FEE | RATE                    |
| X\$ 9=           |                | OR X\$18=               |
| X42=             |                | OR X84=                 |
| +140=            |                | OR +280=                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE     |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * Minus                          | ** =                               |               |
| Independent   | * Minus                          | *** =                              |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| AMENDMENT B      | RATE | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
|------------------|------|----------------|---------------------|----------------|
| X\$ 9=           |      |                | OR X\$18=           |                |
| X42=             |      |                | OR X84=             |                |
| +140=            |      |                | OR +280=            |                |
| TOTAL ADDIT. FEE |      |                | OR TOTAL ADDIT. FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * Minus                          | ** =                               |               |
| Independent   | * Minus                          | *** =                              |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| AMENDMENT C      | RATE | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
|------------------|------|----------------|---------------------|----------------|
| X\$ 9=           |      |                | OR X\$18=           |                |
| X42=             |      |                | OR X84=             |                |
| +140=            |      |                | OR +280=            |                |
| TOTAL ADDIT. FEE |      |                | OR TOTAL ADDIT. FEE |                |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" in this space is less than 20, enter "20".
- If the "Highest Number Previously Paid For" in this space is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.